

Steps for Creating Local Policy

The **process** of policy development is just as important as the final product — the policy document. Individuals could work independently to write a policy, but it will be ineffective if it is not supported and implemented districtwide. This requires a team with appropriate representation from the school and community to come to consensus regarding best practices based on local needs. Bringing individuals together to work as a team may present a challenge; however, this process is essential to ensuring the success of policy development and implementation. The end result will be a final policy document that meets local district needs and can be implemented to promote the goal of better health and learning for students.

While the actual policy development process will be different for each school district, following the steps outlined below can help all districts be successful in developing effective nutrition and physical activity policies.

Step 1: Identify Policy Development Team

A districtwide School Health Team (or School Health Council, School Health Advisory Group, etc.) is critical to successful policy development. The team consists of a group of individuals representing the school and community. The School Health Team works to develop, implement, monitor, review and revise school nutrition and physical activity policies. The process may involve the development of a new team or enhancement of an existing School Health Team, such as a school health council or coordinated school health team. The School Health Team serves many purposes, including:

- developing policy language;
- developing guidance to clarify, support and promote policy implementation;
- monitoring policy implementation;
- evaluating the progress of policy implementation;
- serving as a resource to school sites for policy implementation (e.g., providing lists of healthy ideas for incentives, snacks and celebrations, and ideas for classroom physical activity);
- increasing awareness and providing education on health concerns (e.g., students' nutrition needs); and
- revising policy as necessary.

School Health Team Members

At a minimum, USDA's School Wellness Policy legislation requires that parents, students, school food service, the school board, school administrators and the public, be involved in developing the local wellness policy. The State Department of Education has identified additional team members who are critical to the successful development of nutrition and physical activity policies. These include school nurses, physical education coordinator/teachers and health education coordinator/teachers. To optimize success, it is strongly recommended that the team also include other members as appropriate to local needs, as well as those who will be affected by the policy (see *School Health Team Members* on the next page). Districts should also consider the professional diversity of the team and include ethnic, cultural and demographic representation that mirrors the school community.

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It is also important to choose individuals who can champion the team's efforts. Frequently, members of *effective* policy teams demonstrate a combination of the following qualities:

- strong interest in improving school nutrition and physical activity in schools;
- effective communication skills and the attitude of team players;
- understanding of the district's procedural requirements for policy; and
- policy-related experience in the district.

School Health Team Members

Minimum Core Members for School Health Team

- Parents*
- Students*
- School Food Service (e.g., district food service director/manager)*
- School Nurse
- Physical Education Coordinator/Teacher
- Health Education Coordinator/Teacher
- School Board*
- School Administrators (e.g., superintendent, assistant superintendent, principal, assistant principal, school business official, curriculum director)*
- The Public*

**Required by USDA School Wellness Policy legislation*

Recommended Team Members (as appropriate to local needs)

- **Other school staff members**, e.g., school medical advisors, curriculum supervisors, school counselors, family and consumer sciences teachers, school social workers and school business officials
- **Health care providers**, e.g., pediatricians, dietitians, nutrition/health consultants, dentists and representatives of nonprofit health organizations, e.g., American Cancer Society, American Diabetes Association and American Heart Association
- **Community groups**, e.g., YMCA, YWCA, Boy Scouts, Girl Scouts, Boys and Girls Clubs, faith-based groups, school readiness councils and local elected officials
- **Physical activity groups**, e.g., town park and recreation programs, youth sports leagues and commercial fitness centers
- **University departments and other government agencies** involved in nutrition and physical activity, e.g., local cooperative extension service
- **Hospitals and public health representatives**, e.g., local health department/district

Team Leader

A team leader or coordinator should be identified. This person plays a critical leadership role in coordinating the activities of the School Health Team, so it is important to have someone who is qualified, dedicated and can commit the necessary time.

Collaboration

The School Health Team should ensure collaboration with any existing efforts underway in the school or community. The school district may already be working on student wellness issues and have an existing infrastructure, such as a school health council, coordinated school health initiatives, a local Team Nutrition team, or staff members involved in the Carol M. White Physical Education Program (PEP). These teams and team members are well-positioned to assist in the development of the policy. District policies should also be part of the overall school initiatives and connect directly to the strategies in the School Improvement Plan (SIP) to promote student achievement (for those Title I funded schools not making adequate yearly progress under the No Child Left Behind Act).

Responsibilities of School Health Team

Responsibilities of the School Health Team may include, but are not limited to, oversight of the following:

- implementation of district nutrition and physical activity standards;
- integration of nutrition and physical activity in the overall curriculum;
- assurance that staff professional development includes nutrition and physical activity issues;
- assurance that students receive nutrition education and engage in vigorous physical activity;
- pursuit of contracts with outside vendors that encourage healthful eating and reduction of school/district dependence on profits from foods of little nutritional value;
- consistent healthful choices among all school venues that involve the sale of food;
- increasing community awareness of student health needs;
- partnering with community to support policies and programs; and
- preparation of annual reports that include specific information regarding the implementation and evaluation of local policies. This information can include:
 1. monthly district menus and meal counts;
 2. financial data for vending and other food sales;
 3. listing of all a la carte, vending and competitive foods sold by school food service;
 4. listing of all other sales of foods throughout the district, including vending machines, school stores, culinary and special education programs, in-school and in-class fundraisers, etc.;
 5. listing of physical activity programs and opportunities for students throughout the school year;
 6. assessment of student, staff and parent satisfaction and/or support of instituted policies and practices; and
 7. other evaluation data specific to the local district policies.

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The following resources provide more detailed information on the structure, function and role of school health teams.

- *Improving School Health: A Guide to School Health Councils*, American Cancer Society, Inc., 1999: http://actionforhealthykids.org/filelib/resources/Ntl_Guide_to_SHAC.pdf
- *Promoting Healthy Youth, Schools and Communities: A Guide to Community-School Health Advisory Councils*, Iowa Department of Public Health, 2000: http://www.idph.state.ia.us/hpcdp/promoting_healthy_youth.asp

For additional resources to assist schools with establishing a new team or building on existing teams and partnerships, see *School Health Teams* under *Resources* at the end of this section.



Step 2: Identify Local Policy Development Process

There are no standard procedures for developing nutrition and physical activity policies. The process will vary from one district to another. Before the School Health Team can start to develop policies, team members must understand their local school district process for policy development and adoption. The team should find out:

- who in the district needs to be involved or kept informed;
- what format should be used for the document;
- who needs to review and approve drafts; and
- the typical timeline for policy review and approval.

If the School Health Team is not familiar with the district's procedures, the school district superintendent's office can provide specific information on the process. Understanding these requirements upfront will save time and prevent frustration. The process by which the district's policy is developed can have a significant impact on the school and community and on the effectiveness of implementation. It is important for the School Health Team to take time and plan carefully.

School Health Team members must also understand what is needed for compliance with all local, state and federal requirements. The team should identify and review existing state laws and policies, other school districts' policies, and the school district's own local policies that address wellness topics. Districts may have existing local health policies that can be expanded to include nutrition and/or physical activity.

In many cases, state laws and state or local policies are more stringent than the federal law. At a minimum, the school district's nutrition and physical activity policies must be in compliance with the federal statute requirements, plus all relevant state and district requirements. Information on Connecticut's relevant laws is found in *Federal and State Laws and Regulations Pertaining to Nutrition and Physical Activity* on the next page.

Federal and State Laws and Regulations Pertaining to Nutrition and Physical Activity

Health Education

Connecticut General Statutes Section 10-16b. Prescribed courses of study. (a) In the public schools the program of instruction offered shall include at least the following subject matter, as taught by legally qualified teachers, the arts; career education; consumer education; health and safety, including, but not limited to, human growth and development, nutrition, first aid, disease prevention, community and consumer health, physical, mental and emotional health, including youth suicide prevention, substance abuse prevention, safety, which may include the dangers of gang membership, and accident prevention; language arts, including reading, writing, grammar, speaking and spelling; mathematics; physical education; science; social studies, including, but not limited to, citizenship, economics, geography, government and history; and in addition, on at least the secondary level, one or more foreign languages and vocational education. For purposes of this subsection, language arts may include American sign language or signed English, provided such subject matter is taught by a qualified instructor under the supervision of a teacher who holds a certificate issued by the State Board of Education.

(c) Each local and regional board of education shall on September 1, 1982, and annually thereafter at such time and in such manner as the Commissioner of Education shall request, attest to the State Board of Education that such local or regional board of education offers at least the program of instruction required pursuant to this section, and that such program of instruction is planned, ongoing and systematic.

<http://www.cga.ct.gov/2005/pub/Chap164.htm#Sec10-16b.htm>

Physical Education

Connecticut General Statutes Section 10-221a. High school graduation requirements. (b) Commencing with classes graduating in 2004, and for each graduating class thereafter, no local or regional board of education shall permit any student to graduate from high school or grant a diploma to any student who has not satisfactorily completed a minimum of twenty credits, not fewer than four of which shall be in English, not fewer than three in mathematics, not fewer than three in social studies, including at least one-half credit course on civics and American government, not fewer than two in science, not fewer than one in the arts or vocational education and not fewer than one in physical education.

<http://www.cga.ct.gov/2005/pub/Chap170.htm#Sec10-221a.htm>

Physical Activity

Connecticut General Statutes 10-221o. Lunch Periods and Recess. Each local and regional board of education shall require each school under its jurisdiction to (1) offer all full day students a daily lunch period of not less than twenty minutes, and (2) include in the regular school day for each student enrolled in grades kindergarten to five, inclusive, a period of physical exercise, except that a planning and placement team may develop a different schedule for a child requiring special education and related services in accordance with chapter 164 and the Individuals With Disabilities Education Act, 20 USC 1400 et seq., as amended from time to time. In the event of a conflict with this section and any provision of chapter 164, such other provision of chapter 164 shall be deemed controlling.

<http://www.cga.ct.gov/2005/pub/Chap170.htm#Sec10-221o.htm>

Foods and Beverages

Connecticut General Statutes Section 10-215. Lunches, breakfasts and other feeding programs for public school children and employees. Any local or regional board of education may establish and operate a school lunch program for public school children, may operate lunch services for its employees, may establish and operate a school breakfast program, as provided under federal laws governing said programs, or may establish and operate such other child feeding programs as it deems necessary. Charges for such lunches, breakfasts or other such feeding may be fixed by such boards and shall not exceed the cost of food, wages and other expenses directly incurred in providing such services. When such services are offered, a board shall provide free lunches, breakfasts or other such feeding to children whose economic needs require such action under the standards promulgated by said federal laws. Such board is authorized to purchase equipment and supplies that are necessary, to employ the necessary personnel, to utilize the services of volunteers and to receive and expend any funds and receive and use any equipment and supplies which may become available to carry out the provisions of this section. Any town board of education may vote to designate any volunteer organization within the town to provide a school lunch program, school breakfast program or other child feeding program in accordance with the provisions of this section.

<http://www.cga.ct.gov/2005/pub/Chap169.htm#Sec10-215.htm>

Regulations of Connecticut State Agencies Section 10-215b-1. Competitive Foods.

(a) No school food authority shall permit the sale or dispensing to students of extra food items anywhere on the school premises from thirty minutes prior to the start of any state or federally subsidized milk or food service program until thirty minutes after such program.

(b) "Extra food items" means tea, coffee, soft drinks and candy.

(c) "School food authority" means the governing body which has the legal authority to operate one or more school feeding programs and receive state or federal subsidies for the operation of any such program.

(d) The provisions of this section shall not apply to the Department of Corrections.

Regulations of Connecticut State Agencies Section 10-215b-23. Income from the sale of food items. The income from the sale to students of food items, anywhere on the school premises from thirty minutes prior to the start of any state or federally subsidized milk or food service program until thirty minutes after any such program, shall accrue to the school food authority for the benefit of state or federally subsidized milk or food service programs.

Note: Regulations 10-215b-1 and 10-215b-23 only apply to schools participating in USDA's National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program.

Connecticut General Statutes Section 10-221p. Boards to make available for purchase nutritious, low-fat foods and drinks. Each local and regional board of education shall make available in the schools under its jurisdiction for purchase by students enrolled in such schools nutritious, low-fat foods and drinks, which shall include, but shall not be limited to, low-fat milk, one hundred per cent natural fruit juices and water at all times when drink is available for purchase by students in such schools and low-fat dairy products and fresh or dried fruit at all times when food is available for purchase by students in such schools during the regular school day. <http://www.cga.ct.gov/2005/pub/Chap170.htm#Sec10-221p.htm>

Note: This statute applies to all public schools, regardless of whether they are participating in USDA's federally funded Child Nutrition Programs.

Foods and Beverages, Continued

Connecticut General Statutes Section 10-266w. School breakfast grant program. (a) For each fiscal year, each local and regional board of education having at least one school building designated as a severe need school, as defined by federal law governing school nutrition programs, in the fiscal year two years prior to the grant year, shall be eligible to receive a grant to assist in providing school breakfasts to all students in each eligible severe need school, provided any local or regional board having at least one school building so designated shall participate in the federal school breakfast program on behalf of all severe need schools in the district with grades eight or under in which at least eighty per cent of the lunches served are served to students who are eligible for free or reduced price lunches pursuant to federal law and regulations. <http://www.cga.ct.gov/2005/pub/Chap172.htm#Sec10-266w.htm>

USDA Regulations 7 CFR 220.8 School Breakfast Program: Specifies the requirements for the School Breakfast Program, including nutrition standards for breakfasts and menu planning requirements. <http://www.fns.usda.gov/cnd/Governance/regulations.htm>

USDA Regulations 7 CFR 210.10 National School Lunch Program: Specifies the requirements for the National School Lunch Program, including nutrition standards for lunches and menu planning requirements. <http://www.fns.usda.gov/cnd/Governance/regulations.htm>

USDA Regulations 210.11 (a) (2) Competitive Food Services: Federal regulations prohibit the sale of foods of minimal nutritional value (FMNV) in food service areas during mealtimes. The federal regulations define four specific categories of FMNV, including (1) soda water, (2) water ices, (3) chewing gum and (4) certain candies (hard candy, jellies and gums, marshmallow candies, fondant, licorice, spun candy and candy-coated popcorn). http://www.fns.usda.gov/cnd/Governance/regulations/05-7_CFR_Part_210.pdf

Note: This regulation only applies to schools participating in USDA's National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program. Schools that do not participate in the federally funded Child Nutrition Programs are not subject to any federal nutrition standards.

Food Safety

Section 19-13-B42 of the Regulations for Connecticut State Agencies: Specifies the requirements of the Connecticut Public Health Code for the Sanitation of Places Dispensing Foods and Beverages. <http://www.dph.state.ct.us/BRS/food/fpregs.htm>

Section 111 Of Public Law 108-265 School Food Safety Program: Each school food authority shall implement a school food safety program, in the preparation and service of each meal served to children, that complies with any hazard analysis and critical control point system established by the Secretary. http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf

Step 3: Conduct Local Assessment Process

Nutrition and Physical Activity Practices

Before making plans to develop policies, the School Health Team should assess the district's current nutrition and physical activity programs, policies and student needs, then identify areas that need improvement. It often helps to begin by conducting a baseline assessment of schools' existing nutrition and physical activity environments. The results of school-by-school assessments can be compiled at the district level to prioritize needs. Some strategies for assessing local needs are listed below.

- Interview nutrition and health professionals to learn more about local eating and physical activity habits and to identify materials and services available for students and school staff members. Schools might interview representatives from: the school food service program; the state Team Nutrition Program; the State Department of Education Child Nutrition Programs; the nutrition unit within the State Department of Health; the district or state school health coordinator; the local WIC program and Cooperative Extension nutrition education program; the state or local chapters of the American Cancer Society, American Diabetes Association, American Dietetic Association and the American Heart Association; nutrition councils or coalitions; university research programs; organizations with special insights into the particular nutrition education needs of cultural and ethnic minorities; and businesses that offer nutrition-related services or food products.
- Interview food service staff members about students' eating practices in the school cafeteria, e.g., percent participation in school meals, types of a la carte items purchased, plate waste and content of lunches sent from home.
- Observe the school cafeteria, the teachers' lunchroom and other areas in the school where food is available.
- Review health, nutrition and physical education curriculums used by teachers.
- Review school district policies regarding recess and physical activity.
- Survey teachers to determine how nutrition and physical education are taught, and where they fit into the comprehensive school health curriculum.
- Survey the level of teachers' interest in nutrition, physical activity or wellness programs for themselves.
- Survey schools regarding current practices on fundraising, celebrations and use of food by school staff members for reward or punishment.
- Survey schools regarding foods and beverages sold in vending machines, school stores and a la carte in the cafeteria.
- Survey students to determine their dietary preferences and the types of healthy changes they want in foods at school.
- Survey parents regarding family nutrition practices and issues of concern regarding nutrition and physical activity.

Strategies adapted with permission from *Guidelines for School Health Programs to Promote Lifelong Healthy Eating*. Centers for Disease Control and Prevention, MMWR, June 14, 1996/45(RR-9);1-33.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/00042446.htm>

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The Centers for Disease Control and Prevention's *School Health Index* (SHI) provides a comprehensive tool for assessing current nutrition and physical activity practices at the local school level.

- *School Health Index for Physical Activity and Healthy Eating – A Self Assessment and Planning Guide*, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, 2005: <http://apps.nccd.cdc.gov/shi/>

The SHI enables schools to:

- identify strengths and weaknesses of health and safety policies and programs;
- develop an action plan for improving student health; and
- engage teachers, parents, students, and the community in promoting health-enhancing behaviors and better health.

The items in the SHI are based on CDC's research-based guidelines for school health programs, which identify the policies and practices most likely to be effective in reducing youth health risk behaviors. The SHI is structured around CDC's eight-component model of coordinated school health. For more information on coordinated school health, see *Coordinated School Health* under *Resources* at the end of this section.

Additional resources to assist schools with the self-assessment and planning process are found in *Program Assessment* under *Resources* at the end of this section.

Student Health Data

Identifying data on the education and health status of students in the local district provides a powerful rationale for local-level change and assists in prioritizing areas of work. Districts can review local health data, such as student fitness tests, BMI data and other indicators of student health. Local health departments and community organizations can also provide relevant local data. State agencies (e.g., Departments of Public Health and Education) and organizations (e.g., American Cancer Society, American Heart Association and American Diabetes Association) can also provide community and state data. Some local data sources include:

- *Child Well-Being Data Reports*, Connecticut Voices for Children: http://www.ctkidslink.org/pub_issue_15.html and http://www.ctkidslink.org/pub_detail_247.html
- *Community Data Profiles on Young Children*, Child Health and Development Institute of Connecticut: http://www.chdi.org/resources_profile.asp
- *Connecticut Department of Public Health's Annual Registration Reports* (Statistics from the Connecticut vital records databases, including analyses of births and deaths): <http://www.dph.state.ct.us/OPPE/ANNUALREGREPORTS.HTM>
- *Connecticut School Health Survey (CSHS)*: <http://www.dph.state.ct.us/PB/HISR/CSHS.htm>
- *Connecticut State Department of Education's Strategic School Profiles* (percent of students passing all four physical fitness tests): <http://www.csde.state.ct.us/public/cedar/profiles/index.htm>
- *Connecticut State Profile*, Action for Healthy Kids: http://actionforhealthykids.org/state_profile.php?state=CT

National data is available from many sources, such as the Centers for Disease Control and Prevention, the U.S. Department of Agriculture and Action for Healthy Kids. Some of these resources provide state profiles in addition to national summaries. Some sources for national data on the health status of young people are listed below. For additional resources on children's nutrition and physical activity status, see *Data and Trends* under *Resources* at the end of this section.

- Action for Healthy Kids:
<http://actionforhealthykids.org/index.php>
- Childhood Obesity Fact Sheets (CDC):
<http://www.cdc.gov/healthyouth/obesity/facts.htm>
- National Center for Health Statistics (CDC) Health and Nutrition Examination Survey:
<http://www.cdc.gov/nchs/nhanes.htm>
- Obesity Trends Among Children and Adolescents (CDC):
<http://www.cdc.gov/nccdphp/dnpa/obesity/trend/>
- School Health Policies and Programs Study – SHPPS (CDC):
<http://www.cdc.gov/HealthyYouth/shpps/index.htm>
- Trend Fact Sheets from YRBSS (CDC):
<http://www.cdc.gov/HealthyYouth/yrbs/factsheets.htm>
- Youth Risk Behavior Surveillance System – YRBSS (CDC):
<http://www.cdc.gov/HealthyYouth/yrbs/index.htm>
- U.S. Department of Agriculture Economic Research Service:
<http://www.fns.usda.gov/fns/research.htm>
- U.S. Department of Agriculture Office of Analysis, Nutrition and Evaluation:
<http://www.fns.usda.gov/oane/>

When gathering assessment data, it is also important to keep the end in mind. Districts should consider what data will be useful to determine the impact of the local policies and to measure outcomes over time. Baseline data is critical to the evaluation process in determining whether the desired changes have occurred. For additional information on evaluation, see *Section 8 – Measurement and Evaluation*.



Step 4: Prioritize Needs and Develop an Action Plan

To facilitate policy development, the School Health Team should prioritize the areas for change and address them in order of local importance. After completing a needs assessment (see *Step 3 – Conduct Local Assessment Process*), the School Health Team can determine the critical areas for change and develop an action plan with recommended strategies to improve performance. The *School Health Index (SHI)* is useful in this process.

- *School Health Index for Physical Activity and Healthy Eating – A Self Assessment and Planning Guide*, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, 2005: <http://apps.nccd.cdc.gov/shi/>

The SHI includes a section on prioritizing areas for improvement, based on importance, cost, time, commitment and feasibility. The results of school-by-school assessments can be compiled at the district level to prioritize needs. This step allows the School Health Team to decide on the key actions that will be implemented first.

The SHI also includes a School Health Improvement Plan that allows the School Health Team to list the steps identified and plan for implementation of recommended actions. Completing the SHI is an important first step toward improving school health promotion policies and practices. Schools can then act to implement the School Health Improvement Plan and develop an ongoing process for monitoring progress and reviewing the recommendations for change.

School and community forums can be used to inform the broader school community of the findings of the assessment, gather additional input and build consensus for recommendations and proposed actions. The *Healthy Eating Active Living Resource Toolkit* (Connecticut Association of Directors of Health) is a good resource to assist schools with this process. It provides descriptions and examples of a step-by-step process for team building, assessment, development of action plans and evaluation. The kit is available at:

<http://www.cadh.org/CADHResources/HealthyEatingActiveLivingToolkit/tabid/61/Default.aspx>.

Additional resources to assist districts with prioritizing local needs and developing an action plan are found in *Program Assessment* and *Policy Development* under *Resources* at the end of this section.

Step 5: Draft Policy Language

The School Health Team should use the results of the needs assessment to draft initial policy statements (see *Step 3 – Conduct Local Assessment Process* and *Step 4 – Prioritize Needs and Develop an Action Plan*). Policies should address the six policy components:

1. Nutrition Education and Promotion;
2. Physical Activity and Physical Education;
3. Nutrition Standards for School Foods and Beverages (School Meals and Other Foods and Beverages);
4. Other School-Based Activities to Promote Student Wellness;
5. Communication and Promotion; and
6. Measurement and Evaluation.

USDA School Wellness Policy regulations require that districts address:

- *nutrition education;*
- *physical activity,*
- *other school-based activities designed to promote student wellness;*
- *nutrition guidelines for all foods at school;*
- *assurance that school meals meet USDA guidelines; and*
- *a plan for measuring implementation.*

Sections 3 through 8 of this guide contain recommended (not required) policy language and additional implementation guidance for each of the six policy components. School districts are encouraged to adapt policy language to meet local needs and reflect community priorities.

Fit, Healthy and Ready to Learn: A School Health Policy Guide from the National Association of State Boards of Education (<http://www.nasbe.org/healthyschools/fithealthy.html>) is a useful tool for developing policy language. This guide provides direction on establishing an overall policy framework for school health programs and specific policies on various topics, including healthy eating and physical activity.

Fit, Healthy and Ready to Learn provides an excellent starting place for sample language that the School Health Team may consider adapting to meet the school district's needs. The following websites also contain a wealth of resources and information on sample policy language:

- USDA Team Nutrition:
<http://www.fns.usda.gov/tn/Healthy/wellnesspolicy.html>
- National Alliance for Nutrition and Activity:
<http://www.schoolwellnesspolicies.org/>
- School Nutrition Association:
<http://www.schoolnutrition.org/Index.aspx?id=1075>
- Action for Healthy Kids:
http://www.actionforhealthykids.org/resources_wp.php

Many other federal, state and local organizations have developed model language and sample policies. For more information, see *Policy Development* and *Sample Policies* under *Resources* at the end of this section. The policies developed by the Connecticut School Nutrition Policies Pilot districts are found in *Section 9 – School Nutrition Policies Pilots*.

Tips for Drafting Policy Language

- **Follow established, science-based health guidelines.** School policies must follow science-based guidelines from credible health organizations and government agencies, such as the U.S. Department of Agriculture, U.S. Department of Health and Human Services, American Academy of Pediatrics, Centers for Disease Control and Prevention and National Association for Sport and Physical Education. Undocumented and overly restrictive dietary approaches to childhood weight control, behavior management or other health issues are not appropriate as school policy.
- **Be consistent** with existing state and federal requirements and local district policies addressing student health.
- **Be concise.** Use language that is simple, clear and specific and that avoids jargon.
- **Include the rationale** for the policy (based on national, state and local data) and the benefits of adopting the policy.
- **Be realistic.** The goals you set for nutrition education and physical activity, the nutrition guidelines and other school-based activities must be developed while recognizing both where you would like your school district to be, and where it is now; they should be realistic and attainable.
- **Provide options.** It is often a good idea to propose several policy options from which decision makers can choose.
- **Provide practical guidance** for school staff members regarding implementation.
- **Provide data regarding financial impact.** The local school board or superintendent will probably want to know the financial implications of each policy option, particularly in regard to nutrition guidelines for foods and beverages sold in vending machines or school stores. The Connecticut State Department of Education's Healthy Snack Pilot provides detailed information on the financial impact of a year-long pilot in five schools, as well as guidance on providing healthy snacks throughout the school environment (see *Section 5 – Nutrition Standards for School Foods and Beverages*). USDA and CDC's joint publication *Making It Happen: School Nutrition Success Stories* provides examples of success stories in which schools improved the nutritional quality of foods offered and maintained revenue. (For additional information, see *Success Stories* under *Resources* at the end of this section.)
- **Plan for evaluation.** The School Health Team will find it helpful to draft a plan for implementing and measuring the new policy while drafting the policy itself. Questions to consider include: What indicators will be used to evaluate the progress of implementation? Who will be responsible for monitoring the implementation of the policy? How often will the implementation be evaluated? Answering these questions while the initial policy is drafted will help the team anticipate challenges and prepare to meet them. (For additional information, see *Section 8 – Measurement and Evaluation*.)
- **Keep decision makers informed.** Decision makers do not like surprises. The team needs to keep school district decision makers informed about the proposed policy and obtain their support throughout the development process.

Adapted with permission from *Fit, Healthy and Ready to Learn*, National Association of State Boards of Education, 2000.

Step 6: Build Awareness and Support

Educating various audiences — such as administrators, teachers, food service staff members, parents, students and the community — about the district's policy initiative is critical to success. Healthy nutrition and physical activity practices will need significant support from students, families, school staff members and the community. It is essential to obtain their input during the policy development process in order for the policy to be smoothly adopted and widely implemented. Ideally, all of these groups will be part of the School Health Team and can provide representative input on behalf of their members.

Tips for Success

- **Gather input from the school and community.** Input can be gathered informally and formally through a variety of channels such as student advisory councils and surveys; parent meetings and surveys; and community forums and town meetings.
- **Use local media to spread awareness of the district's needs and proposed policies** (see *Working with the Media* under *Resources* in *Section 7 – Communication and Promotion*). When dealing with the education community, it is helpful to identify the potential benefits the policy can have on student learning and academic achievement. Data and resources are contained in *Health and Achievement* under *Resources* at the end of this section.
- **Enlist community leaders to speak out in favor of the proposed solutions.** Community leaders can be powerful champions in building awareness and support for the district's nutrition and physical activity policies.
- **Be prepared for challenges that may arise.** School and community responses to policy language around nutrition and physical activity practices can be unexpectedly controversial (such as what foods are or are not allowed for school parties or fundraisers). Research the facts and prepare in advance to respond to concerns with specific talking points that reflect scientific data and guidelines for best practice. Be sure that all spokespeople for the policy are providing a consistent message.
- **Learn from others' successes.** The Connecticut School Nutrition Policies Pilot districts implemented a variety of activities to promote awareness and build local support (see *Section 9 – School Nutrition Policies Pilots*). USDA's *Making it Happen! School Nutrition Success Stories* documents successes with building local support for school health policy goals (<http://www.fns.usda.gov/tn/Resources/makingithappen.html>). Additional strategies are found in *Success Stories* under *Resources* at the end of this section.

Step 7: Adopt and Implement the Policy

Developing and adopting a sound policy is only the beginning. The adoption of a policy does not automatically mean that it will be implemented. Implementation requires good planning and management skills, the necessary resources, consistent oversight and widespread buy-in by school staff members and the local community. Leadership, commitment, communication and support are key to successful policy implementation.

Implementation can occur all at once or may be phased in over time. The School Health Team is in the best position to determine which approach is likely to be most effective in the district.

The attitude of all school personnel – individuals serving the food, the personnel who stock vending machines, students, coaches, teachers and administrators – can have a significant effect on the response to the policy. A positive attitude toward new foods, new physical activity options or other changes – from everyone in the school community – can make a huge difference.

Communication and promotion can be important tools for policy implementation. A proactive communication plan can help inform, educate and build support for adopting and implementing school nutrition and physical activity policies. For more information, see *Section 7 – Communication and Promotion*.



Step 8: Maintain, Measure and Evaluate

In order for policies to be successful, school districts must establish a plan for measuring implementation and sustaining local efforts. This includes evaluation, feedback and documentation based on sound evidence.

A sustained effort by each district is necessary to ensure that new policies are faithfully implemented. The School Health Team or other designated staff members must periodically assess how well the policies are being managed and enforced. It may be necessary to reinforce policy goals with school staff members. School Health Teams may also need to update or amend policies based on changes such as new research and trends in community health needs.

Evaluation and feedback are very important in maintaining local nutrition and physical activity policies. Districts need to document any changes that result from the policies, such as:

- financial impact on the school food service program;
- school stores or vending machine revenues;
- student health trends;
- time spent on physical activity; and
- nutrition education programs conducted.

It is also important to assess student, parent, teacher, administrator and other school staff member satisfaction with the new policies.

A good evaluation plan does not need to be extensive or formal or put additional, undue burdens on team members or others who are involved in the process. Through the evaluation process, the district will be able to answer some basic questions that are very important to policymakers, students, school staff members, families and the general public.

Keep in mind that the policy process is ongoing – it does not end with the development of the policy document. Policy implementation requires regular evaluation. For additional resources and more information on the evaluation process, see *Section 8 – Measurement and Evaluation*.

*USDA School Wellness Policy regulations require that districts **establish a plan for measuring implementation of the local wellness policy**, including the designation of one or more persons within the local education agency or at each school, as appropriate, charged with ensuring that the school meets the local wellness policy.*

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- USDA Regulations for the National School Lunch Program, 7 CFR Part 210:*
<http://www.fns.usda.gov/cnd/Governance/regulations.htm>

Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the *Action Guide*.

Coordinated School Health

- Health is Academic*, Eva Marx and Susan Frelick Wooley with Daphne Northrop. Teachers College Press, 1998. Comprehensive guide that defines coordinated school health programs and discusses how they contribute to the health and educational achievement of students; who participates in and supports these programs at the local school, state and national levels; and how to implement these programs. Ordering Information: <https://secure.edc.org/publications/prodview.asp?930>
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- School Health Starter Kit*, Council of Chief State School Officers. Designed for use by chief state school officers, state health officials and their staffs to help build support in communities and schools for coordinated school health. Includes downloadable PowerPoint presentation on coordinated school health. <http://www.ccsso.org/publications/details.cfm?PublicationID=59>
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Health and Achievement

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Rhode Island School District Nutrition & Physical Activity Model Policy Language: Rhode Island Healthy Schools Coalition, August 2004: <http://www.actionforhealthykids.org/resources.php> (Select "Guidelines/Policies/Recommendations" under topic selection, then click on "view all documents" under Information and Resources and scroll down alphabetically.)

Sample School Nutrition Policies, School Nutrition Association:

<http://www.schoolnutrition.org/Index.aspx?id=1075>

School Nutrition Association Local Wellness Policy Recommendations, School Nutrition Association, 2005:

<http://www.schoolnutrition.org/Index.aspx?id=1075>

School Wellness Policy Tool, Action for Healthy Kids. Searchable database of policies (state and district) that can help guide the drafting of local wellness policies. The extensive database is easily searchable by five wellness policy topic areas: nutrition education goals; physical activity goals; nutrition standards for all foods and beverages; other school-based wellness activities; and governance and evaluation. Individual components of sample wellness policies are also searchable by state.

<http://www.actionforhealthykids.org/resources.php>

The Maine Guide: Supporting Healthy Changes in School Nutrition Environments, Maine Department of Education and the Maine Nutrition Network, 2004. Showcases the process that the State of Maine developed for improving nutrition and physical activity environments in schools.

<http://www.maine-nutrition.org/CTSpag.htm>

Wyoming School Wellness Policy Toolkit, Wyoming Action for Healthy Kids, May 2005. Provides ideas and model policies from across the nation to help districts implement the USDA School Wellness Policy requirement.

http://www.actionforhealthykids.org/filelib/toolsforteam/recom/WY_WY-Wellness%20Policy%20Toolkit.pdf

Success Stories

All It Takes is Nutritious SENSE: Students Encouraging Nutritious Snacks Everyday! Some Montana schools have found out that students will choose healthful items if they are readily accessible and affordable at student stores. This toolkit guides schools through key concepts and considerations necessary to make these positive changes. In the end, the school store will not only continue to be profitable, it will contribute to student health and well-being in the school. <http://www.opi.state.mt.us/schoolfood/nutritionense.htm>

Arizona Healthy School Environment Model Policy Implementation Pilot Study, Arizona State Department of Education, February 2005: http://cspinet.org/nutritionpolicy/AZPilot_RevenueReport.pdf

Bright Ideas, California Project Lean. Effective programs and strategies for healthy eating and physical activity that have made it easier for youth to eat healthy food and/or be physically active at school and that can be replicated in schools or communities.

<http://www.californiaprojectlean.org/brightideas/genBrightIdeasList.asp?CATNID=1004>

Building the Argument: Providing Health-Promoting Foods Throughout Our Schools, Action for Healthy Kids, 2003: http://www.actionforhealthykids.org/filelib/facts_and_findings/hpf_ba.pdf

Examples of Communities and States Improving School Foods and Beverages (Section III Case Studies from School Foods Tool Kit), Center for Science in the Public Interest, September 2003:

http://cspinet.org/schoolfood/school_foods_kit_part3.pdf

Healthy Foods and Healthy Finances: How Schools Are Making Nutrition Changes That Make Financial Sense, Action for Healthy Kids, 2003: http://www.actionforhealthykids.org/newsroom_facts.php

LEAF (Linking Education, Activity and Food) Fiscal Impact Report, Center for Weight and Health, University of California, Berkeley, April 2005: http://cspinet.org/nutritionpolicy/LEAF_Fiscal_ImpactReport.pdf

2 Steps for Creating Local Policy

Making It Happen! School Nutrition Success Stories, U.S. Department of Agriculture, 2005. Highlights 32 schools and school districts that implemented innovative approaches to improving the nutritional quality of foods and beverages offered and sold on school campuses outside of school meals. The most consistent theme emerging from the stories is that students will buy and consume healthful foods and beverages, and schools can make money from healthful options.

<http://www.fns.usda.gov/tn/Resources/makingithappen.html>

Section V Case Studies in Successful Students Through Healthy Food Policies: Act Now for Academic Excellence, California School Board Association, 2005. Purchasing information:

<http://www.csba.org/PS/hf.htm>

School Success Stories, U.S. Department of Agriculture Team Nutrition. Links to interactive and entertaining nutrition education activities with classroom and cafeteria components, e.g., school gardens and school health fairs. <http://teamnutrition.usda.gov/success.html>

Schools and School Districts That Have Improved School Foods and Beverages and Not Lost Money, Center for Science in the Public Interest:

http://cspinet.org/nutritionpolicy/improved_school_foods_without_losing_revenue2.pdf

Successstalk, U.S. Department of Agriculture. An e-mail discussion group intended as a communication tool to link school health professionals, child nutrition educators, principals, teachers, parents and community members who are interested in creating a healthy school nutrition environment. Members can share success stories, resources, information and innovative program ideas that encourage healthy eating and physical activity habits. <http://schoolmeals.nal.usda.gov/Discussion/index.html>

USDA's Fruit and Vegetable Pilot Program Works! Produce for Better Health Foundation, 2003:

<http://www.uffva.org/pdf//brochure052103.pdf>

What's Cooking in Connecticut Schools? Ideas for Healthy Kids and Healthy Schools, Connecticut Food Policy Council, 2004. Highlights actions schools are taking in Connecticut to improve food and nutrition environments. <http://www.foodpc.state.ct.us/images/Report.pdf>

What's Right for Kids: Improving the School Nutrition Environment, Wisconsin Department of Public Instruction, 2003: <http://www.dpi.state.wi.us/dpi/dltcl/bbfcsp/pdf/tnbooklt.pdf>

"What's Working" Database, Action for Healthy Kids. Profiles of successful school-based interventions, programs and practices with ratings based on *Criteria for Evaluating School-Based Approaches to Nutrition and Physical Activity*. <http://www.actionforhealthykids.org/resources.php> (Select a topic under "Resources to Improve Schools" and scroll down to "What's Working.")

Additional resources can be found in the *Healthy School Nutrition Environment Resource List* available at <http://www.state.ct.us/sde/deps/Student/NutritionEd/index.htm>. This list is updated regularly.